

**ARKANSAS STATE BOARD OF EMBALMERS AND FUNERAL DIRECTORS
STUDENT FUNERAL DIRECTOR'S CASE REPORT**

Apprenticeship # _____

A copy of this report must be mailed to the Inspector of the Arkansas State Board of Embalmers no later than the 10th day of the month following the month in which the work was done.

Student's Name _____ Date _____ Case No. _____
Address _____ City/State _____ Zip _____

IDENTIFICATION:

Name of Deceased _____ Address _____
Age _____ Sex _____ Place of Death _____ Date _____ Hour _____
Place of Funeral _____ Date _____ Hour _____
Burial (Where?) _____ Cremation (Where?) _____
Cause of Death _____ How Ascertained _____
Was Body Embalmed? _____ Casket (Type) _____
Outside Container (Type) _____ Condition of Body Day of Funeral _____

WHAT WERE YOUR DUTIES?

- _____ A. Make the arrangements or observe the arrangements being made with the family, including the selection of merchandise.
- _____ B. Set-up church and organize how family and friends are to be directed.
- _____ C. Direct family, or assist in doing so, at the funeral and cemetery service. In addition, dismiss the family and friends at the conclusion of the service.
- _____ D. Be in charge of the movement of the casket and instruct the pallbearers.
- _____ E. Organize the funeral procession and determine where and how parking is to be done at the chapel or Church or any other place.
- _____ F. Arrange flowers
- _____ G. Direct movement of people when viewing deceased, at chapel, church or any other place.
- _____ H. Organize "Order of Service" with minister and musicians.

NARRATE – In your own words; describe in detail your duties on this case. Space provided on back of this form.

Signed _____
Student Funeral Director

This is to certify that this is a true and correct statement of the work done in the above funeral under my personal supervision.

Signed _____
Licensed Funeral Director

License No. _____

NOTE: EVERY LINE MUST BE FILLED IN OR REPORT WILL NOT BE ACCEPTED.

[illegible]